KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form U3C
June 2015
Form must be Typed
Form must be completed on a per well basis

ANNUAL REPORT OF PRESSURE MONITORING, FLUID INJECTION AND ENHANCED RECOVERY

Complete all blanks - add pages if needed. Copy to be retained for five (5) years after filing date.

OPERATOR: License # 33551
Name: S & K Oil Production, Inc.
Address 1: PO BOX 184
Address 2:
City: BLUE MOUND State: KS Zip: 66010 + 0184
Contact Person: Steve Jackson
Phone: (620) 363-2426
Lease Name: WOODWARD
Well Number: 1

API No.: 15-011-20024-00-00
Permit No: D13432.0
Reporting Year: 2017
(January 1 to December 31)

____ - SW - NE - SE Sec. 12 Twp. 25 S. R. 21 ☑ E ☐ W
(Q/Q/Q/Q)
1855 feet from ☐ N / ☑ S Line of Section
3091 feet from ☑ E / ☐ W Line of Section
County: Bourbon

I. Injection Fluid:

Type *(Pick one)*: ☐ Fresh Water ☑ Treated Brine ☐ Untreated Brine ☐ Water/Brine
Source: ☑ Produced Water ☐ Other *(Attach list)*
Quality: Total Dissolved Solids: _____ mg/l Specific Gravity: _____ Additives: _____
(Attach water analysis, if available)

II. Well Data:

Maximum Authorized Injection Pressure: 1000 psi Injection Zone: Bartlesville
Maximum Authorized Injection Rate: 2000 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: _____ *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	620	400	0		31
February	560	400	0		28
March	620	400	0		31
April	600	400	0		30
May	620	400	0		31
June	600	400	0		30
July	620	400	0		31
August	620	400	0		31
September	600	400	0		30
October	620	400	0		31
November	600	400	0		30
December	620	400	0		31
TOTAL	7300		0		

Submitted Electronically